**BUCKS UNIFORMED YOUTH**

**REQUEST FOR SMALL GRANT (UP TO £100)**

**IN MEMORY OF**

**THE LATE LT COL JOHN WILLIAMS MBE TD**

|  |  |
| --- | --- |
| Name of individual requesting grant |  |
| Organisation name |  |
| Full postal address of organisation |  |
| Telephone number of organisation |  |
| Email address of person requesting grant |  |
| Amount required |  |
| Please specify why you require the funding. |  |
| Name of Bank Account |  |
| Name and Location of Bank |  |
| Bank Sort Code |  |
| Bank Account Number |  |
| Decision by Grant Commitee |  |
| Signature of Treasurer |  |
| Date monies paid to organisation and recorded into Bucks Uniformed Youth accounts spreadsheet |  |

This form is to be retained in the Bucks Uniformed Youth Record of Expenditure file and retained for a minimum period of 5 years for audit purposes.